MARYLAND
Department of Health

Public Health Preparedness and Situational Awareness Report: #2020:23

Reporting for the week ending 06/06/20 (MMWR Week #23)

June 12th, 2020

CURRENT HOMELAND SECURITY THREAT LEVELS
National: **No Active Alerts**
Maryland: **ENHANCED (MEMA status)**

SYNDROMIC SURVEILLANCE REPORTS

ESSENCE (Electronic Surveillance System for the Early Notification of Community-based Epidemics): Graphical representation is provided for all syndromes (excluding the "Other" category; see Appendix 1) by Health and Medical Regions (See Appendix 2). Emergency department chief complaint data is presented as rates per 100,000 residents using data from the 2010 census. Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE). Baltimore, MD: Maryland Department of Health; 2019.

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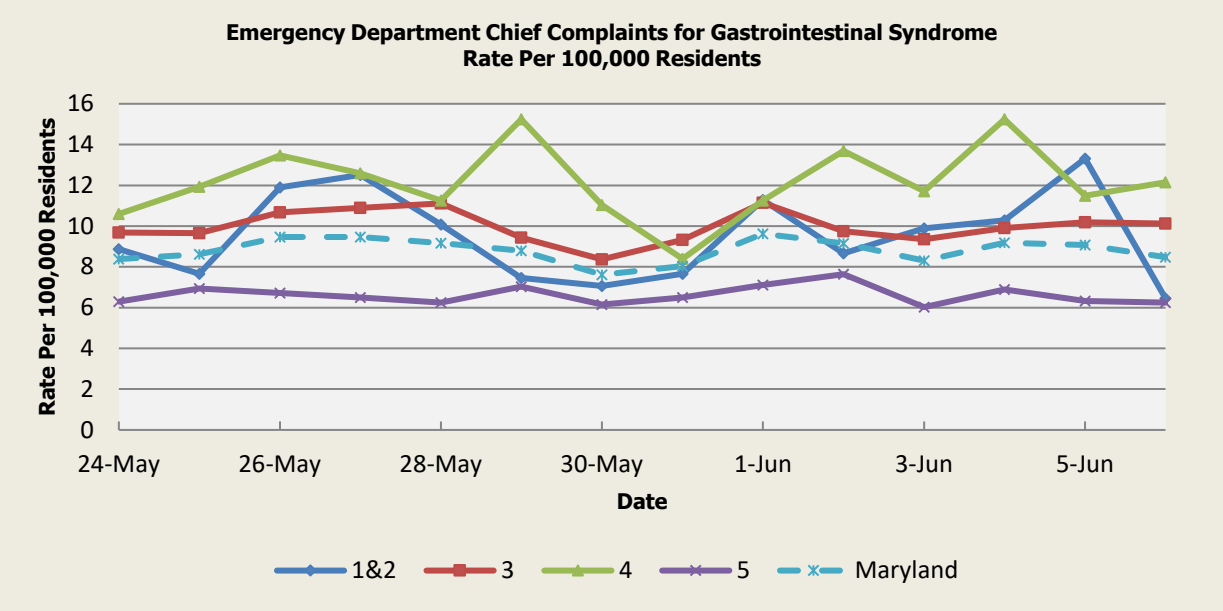
Gastrointestinal Syndrome



There was one (1) Gastrointestinal Syndrome outbreaks reported this week: one (1) outbreak of Gastroenteritis in an Assisted Living Facility (Region 3)

	Gastrointestinal Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	13.28	14.99	15.90	10.24	13.10
Median Rate*	13.11	14.83	15.46	10.17	13.03

** Per 100,000 Residents*

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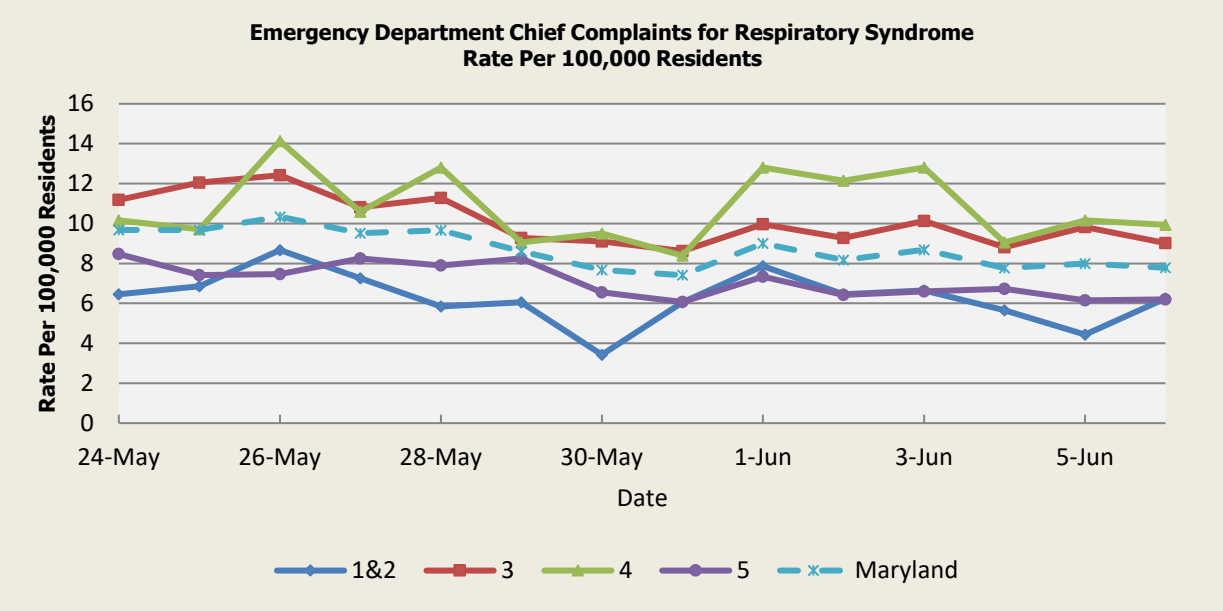
Respiratory Syndrome



There were thirty nine (39) Respiratory Syndrome outbreaks reported this week: six (6) outbreaks of COVID-19 in Assisted Living Facilities (Regions 3,5), one (1) outbreak of COVID-19 in Correctional Facility (Regions 3,4,5), two (2) outbreaks of COVID-19 in Daycare Centers (Region 5), eight (8) outbreaks of COVID-19 in Group Homes (Regions 3,4,5), three (3) outbreaks of COVID-19 in Hospitals (Regions 1&2,3), thirteen (13) outbreaks of COVID-19 in Nursing Homes (Regions 1&2,3,4,5), one (1) outbreak of COVID-19 in an Outpatient Clinic (Regions 1&2), one (1) outbreak of COVID-19 in a Religious Organization (Region 4), one (1) outbreak of COVID-19 in Substance Abuse Treatment Program (Region 3), four (4) 4 outbreaks of COVID-19 in Workplaces (Regions 3,5).

	Respiratory Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	12.63	14.92	15.28	10.13	12.93
Median Rate*	12.10	14.29	14.57	9.69	12.38

** Per 100,000 Residents*

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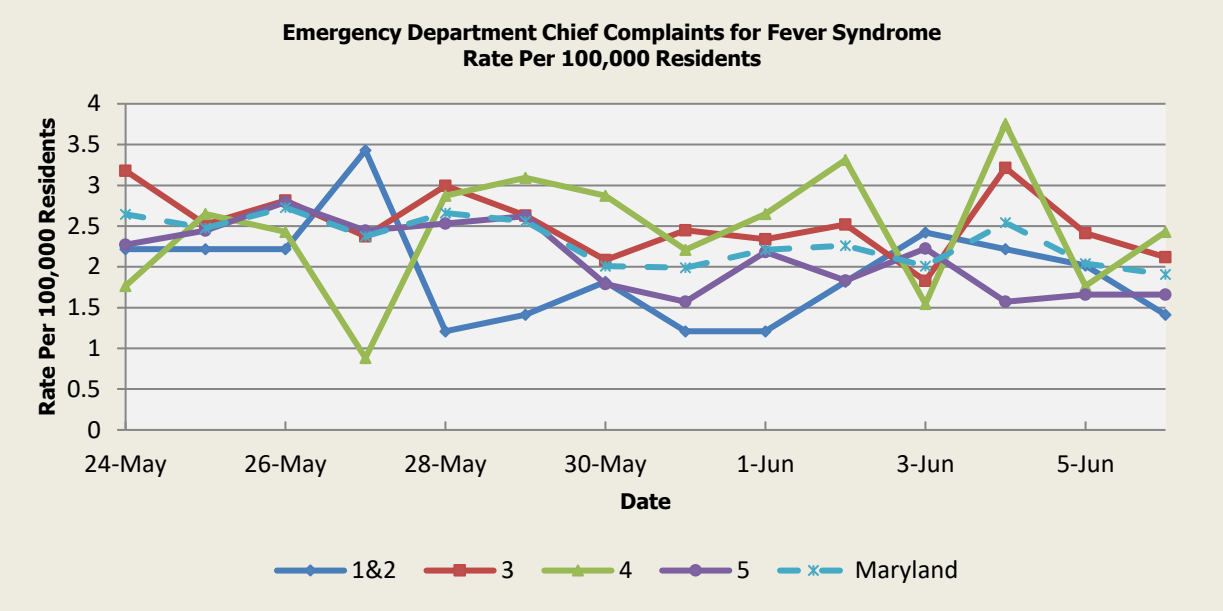
Fever Syndrome



There were no Fever Syndrome outbreaks reported this week.

	Fever Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	3.10	3.93	4.16	3.07	3.55
Median Rate*	3.02	3.80	3.97	2.97	3.41

**Per 100,000 Residents*

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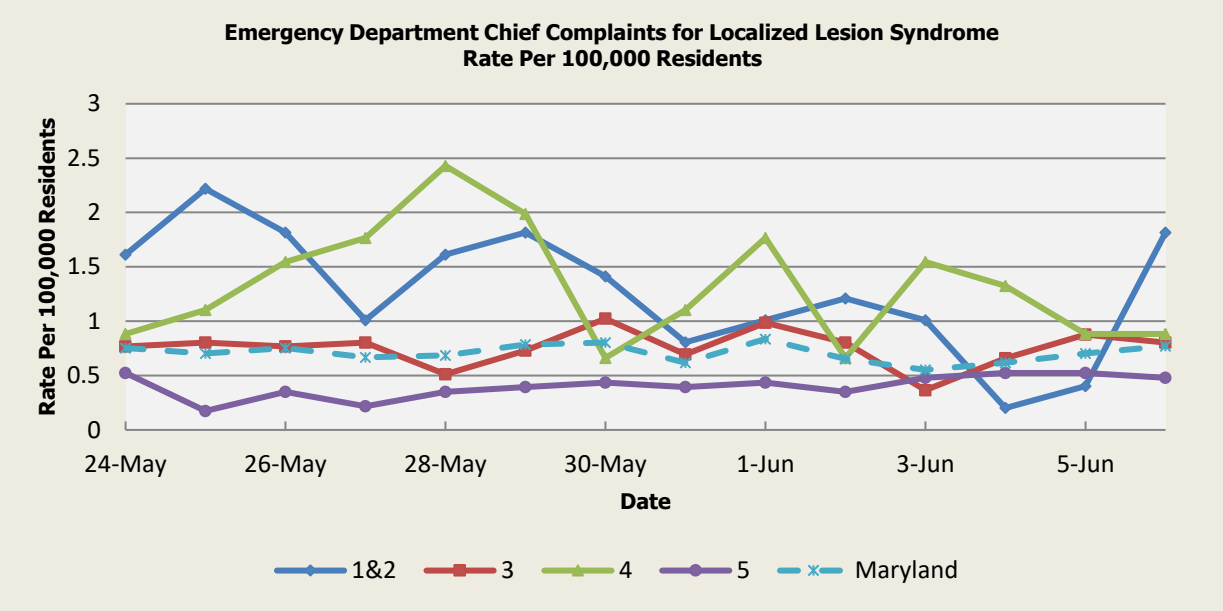
Localized Lesion Syndrome



There were no Localized Lesion Syndrome outbreaks reported this week.

	Localized Lesion Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	1.16	1.74	2.01	0.89	1.38
Median Rate*	1.01	1.68	1.99	0.87	1.34

** Per 100,000 Residents*

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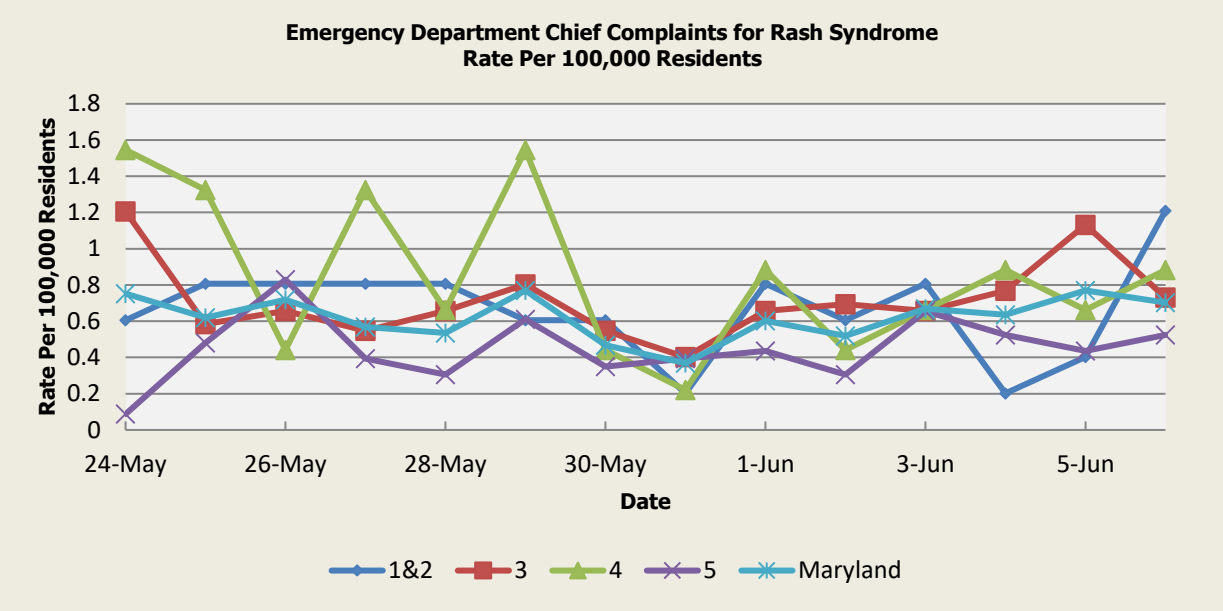
Rash Syndrome



There was no Rash Syndrome outbreak reported this week.

	Rash Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	1.23	1.63	1.72	0.95	1.34
Median Rate*	1.21	1.57	1.55	0.92	1.31

** Per 100,000 Residents*

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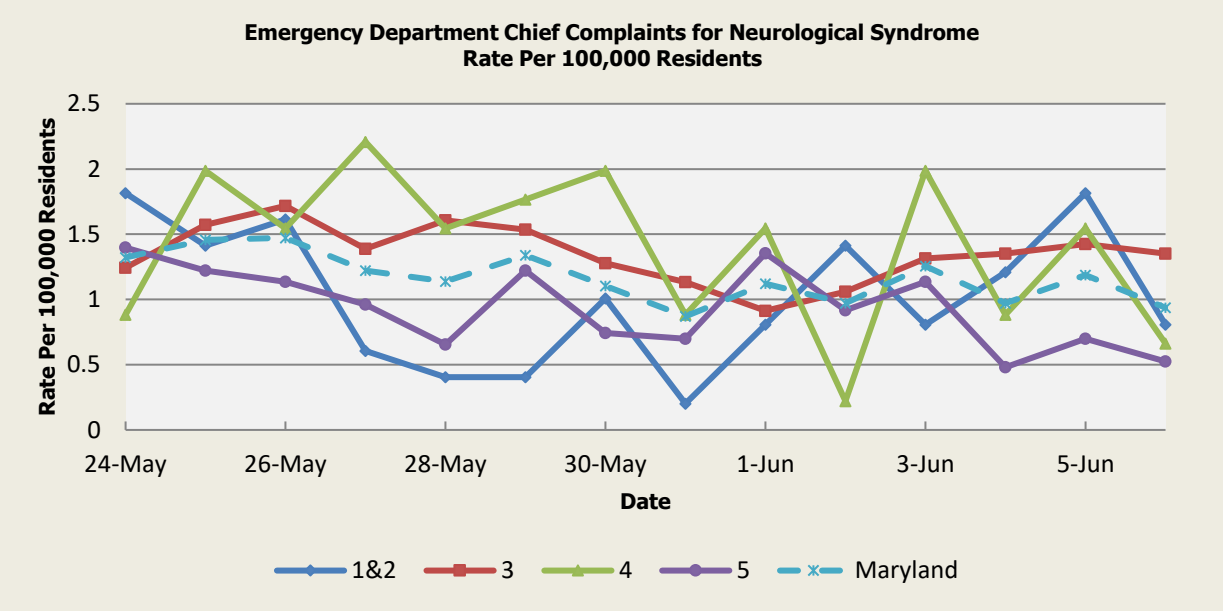
Neurological Syndrome



There were no Neurological Syndrome outbreaks reported this week.

	Neurological Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.81	0.99	0.91	0.63	0.83
Median Rate*	0.81	0.91	0.88	0.57	0.77

** Per 100,000 Residents*

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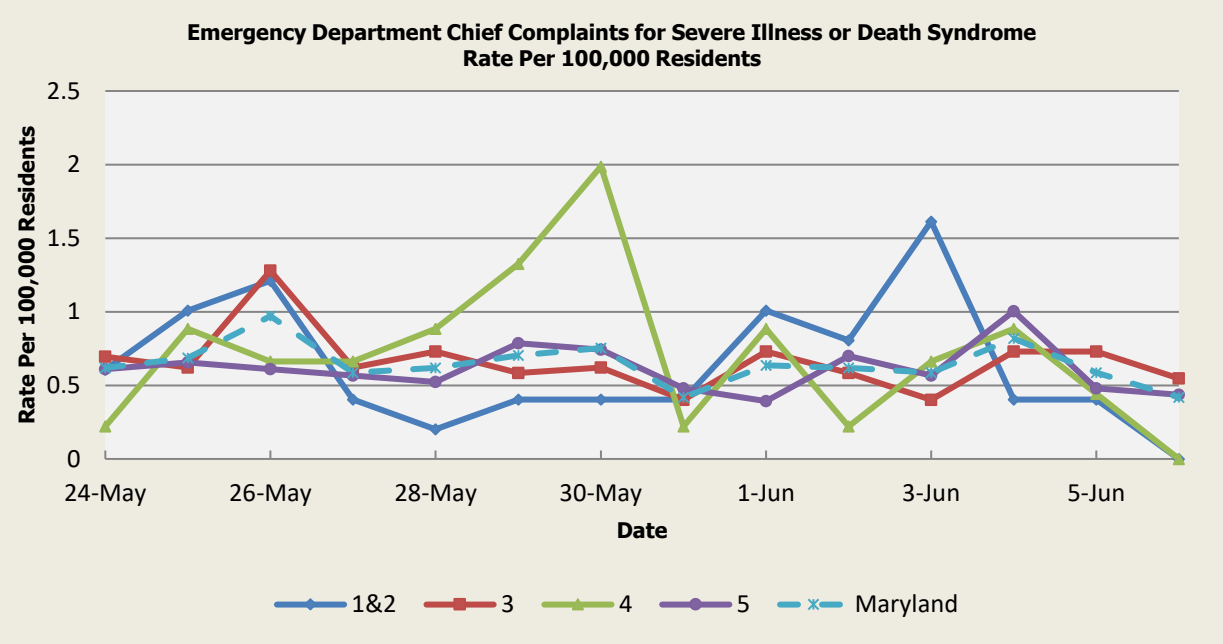
Severe Illness or Death Syndrome



There were no Severe Illness or Death Syndrome outbreaks reported this week.

	Severe Illness or Death Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.65	0.89	0.84	0.53	0.73
Median Rate*	0.60	0.84	0.88	0.48	0.70

** Per 100,000 Residents*

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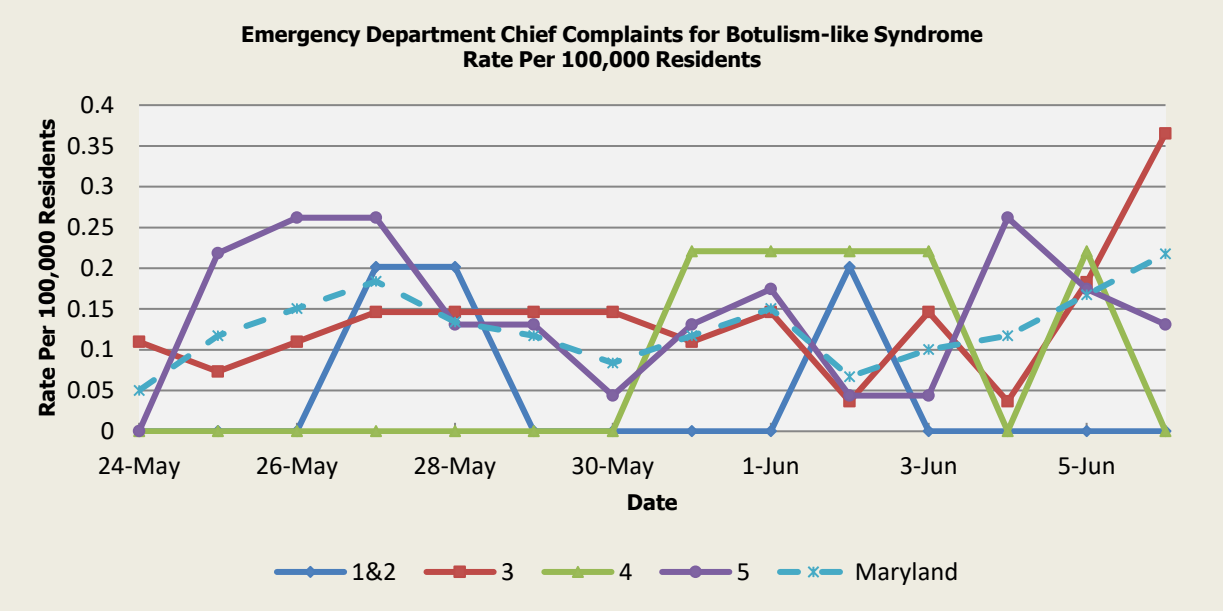
SYNDROMES RELATED TO CATEGORY A AGENTS

Botulism-like Syndrome



There was an appreciable increase above baseline in the rate of ED visits for Botulism-like Syndrome on, 5/25 (Region 5), 5/26 (Region 5), 5/27 (Regions 1&2,5), 5/28 (Region 1),5/31 (Region 4), 6/1 (Regions 4,5), 6/2 (Regions 1&2,4,5), 6/3 (Region 4), 6/4 (Region 5), 6/5 (Regions 4,5). These increases are not known to be associated with any outbreaks.

	Botulism-like Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.08	0.13	0.06	0.08	0.10
Median Rate*	0.00	0.11	0.00	0.04	0.08

** Per 100,000 Residents*

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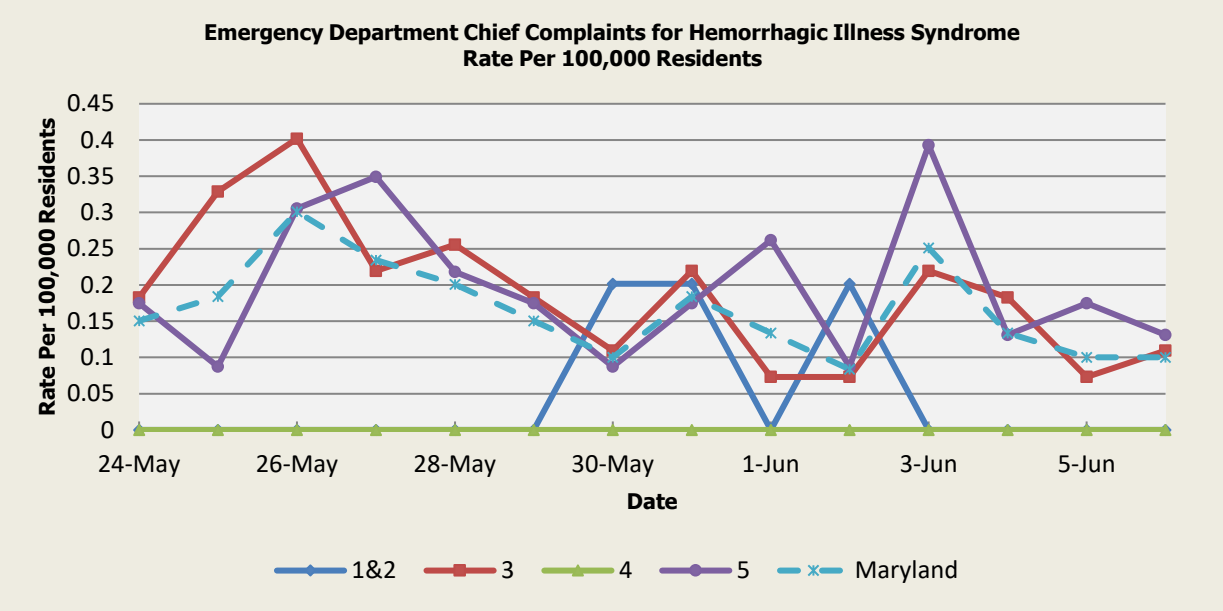
Hemorrhagic Illness Syndrome



There was an appreciable increase above baseline in the rate of ED visits for Hemorrhagic Illness Syndrome on, 5/26 (Region 5), 5/27 (Region5), 5/30 (Regions 1&2), 5/31 (Regions 1&2), 6/2 (Regions 1&2), 6/3 (Region 5). These increases are not known to be associated with any outbreaks.

	Hemorrhagic Illness Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.05	0.17	0.04	0.15	0.14
Median Rate*	0.00	0.11	0.00	0.09	0.10

** Per 100,000 Residents*

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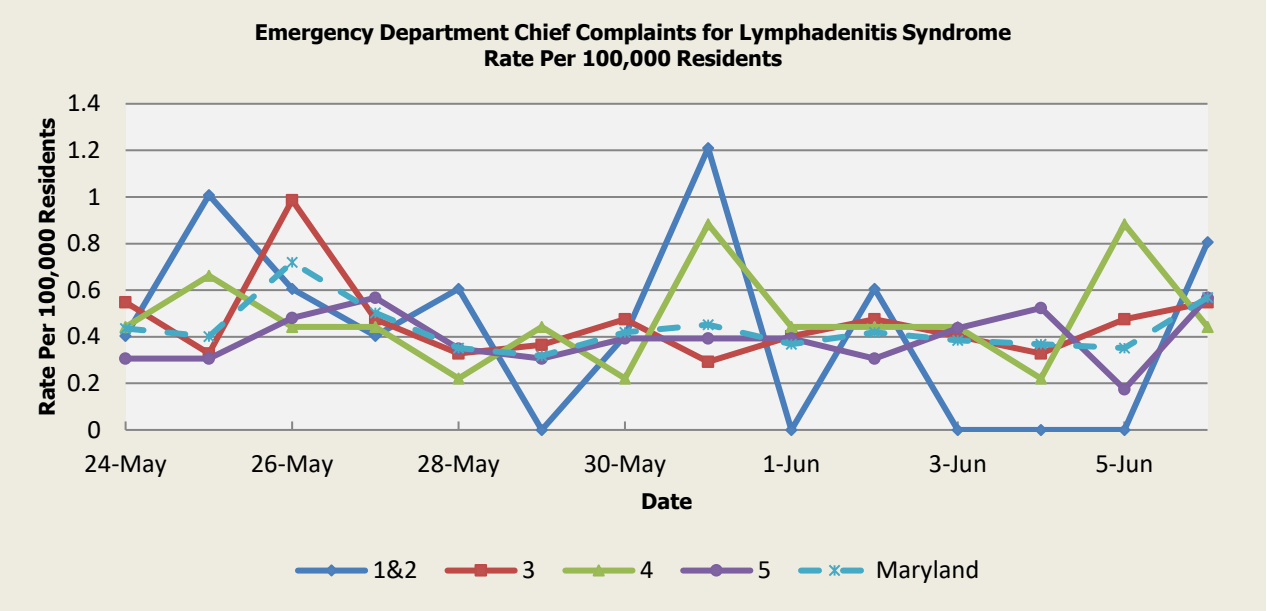
Lymphadenitis Syndrome



There was an appreciable increase above baseline in the rate of ED visits for Lymphadenitis Syndrome on, 5/25 (Regions 1&2), 5/31 (Regions 1&2,4), 6/5 (Regions 1&2), 6/6 (Region 4). These increases are not known to be associated with any outbreaks.

	Lymphadenitis Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.39	0.60	0.40	0.39	0.49
Median Rate*	0.40	0.55	0.44	0.35	0.45

** Per 100,000 Residents*

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MARYLAND REPORTABLE DISEASE SURVEILLANCE

Coronavirus Disease 2019 (COVID-19) Situation Summary

On March 5th, 2020, the Maryland Department of Health announced the first cases of coronavirus disease 2019 (abbreviated COVID-19) in the State of Maryland.

Confirmed COVID-19 Case Counts in Maryland by County (As of June 12th, 2020)

County	Number of Confirmed Cases
Allegany	187
Anne Arundel	4,453
Baltimore City	6,559
Baltimore County	7,051
Calvert	370
Caroline	279
Carroll	977
Cecil	435
Charles	1,248
Dorchester	160
Frederick	2,225
Garrett	10
Harford	991
Howard	2,332
Kent	189
Montgomery	13,348
Prince George's	17,042
Queen Anne's	179
Somerset	78
St. Mary's	575
Talbot	107
Washington	568
Wicomico	1,004
Worcester	246
Total	**60,613**

The most up-to-date information may be found on the Maryland Department of Health website at https://coronavirus.maryland.gov.

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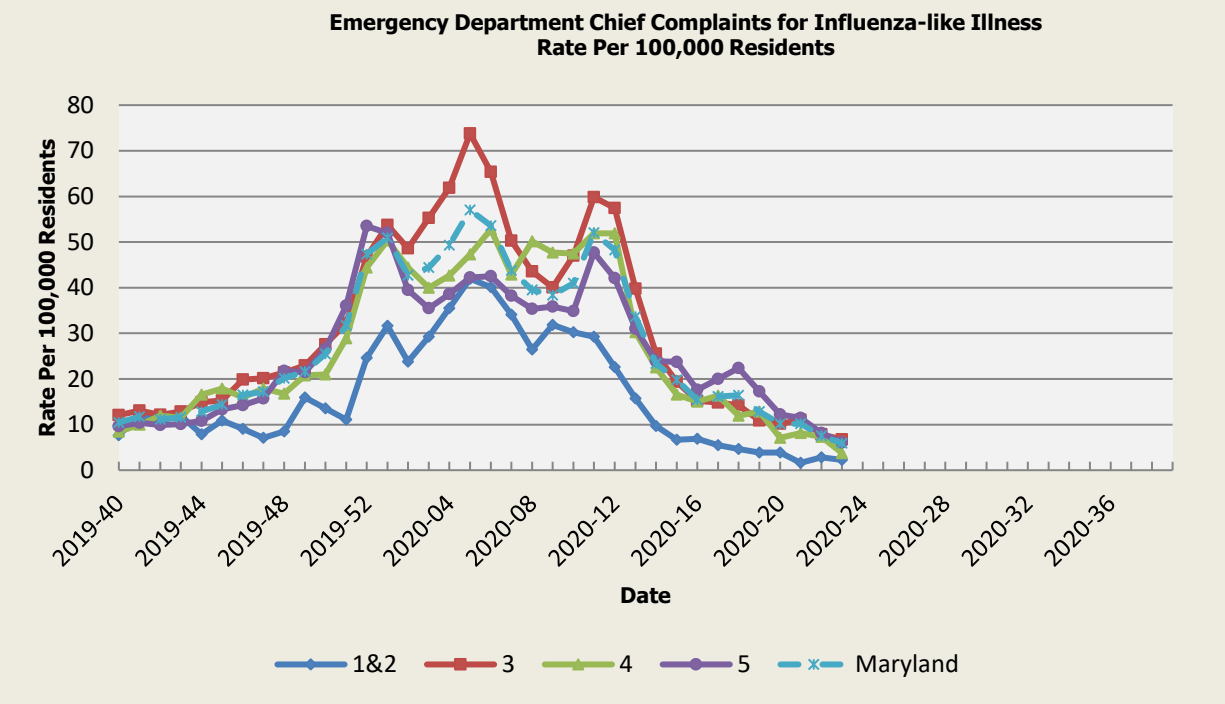
SYNDROMIC INFLUENZA SURVEILLANCE

Seasonal Influenza reporting occurs from MMWR Week 40 through MMWR Week 20 (October 2019 through May 2020). **Due to the COVID-19 pandemic, influenza reporting will be extended to the beginning of the 2020-2021 reporting season (MMWR Week 40/Week Ending October 3, 2020).**

Influenza-like Illness



	Influenza-like Illness Baseline Data Week 1 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	10.55	14.37	13.67	12.17	13.16
Median Rate*	7.76	10.65	9.72	9.04	9.77

** Per 100,000 Residents*

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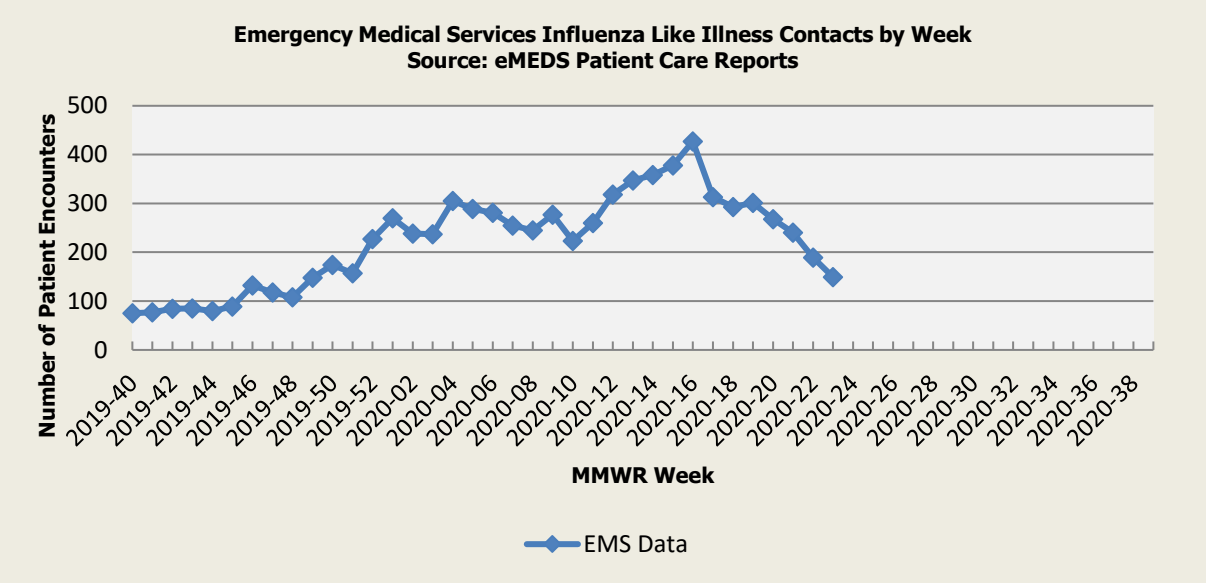
Influenza-like Illness Contacts by Week



Disclaimer on eMEDS flu related data: These data are based on EMS Pre-hospital care reports where the EMS provider has selected "flu like illness" as a primary or secondary impression of a patient's illness. This impression is solely based on the signs and symptoms seen by the provider, not on any diagnostic tests. Since these numbers do not include all primary or secondary impressions that may be seen with influenza the actual numbers may be low. These data are reported for trending purposes only.

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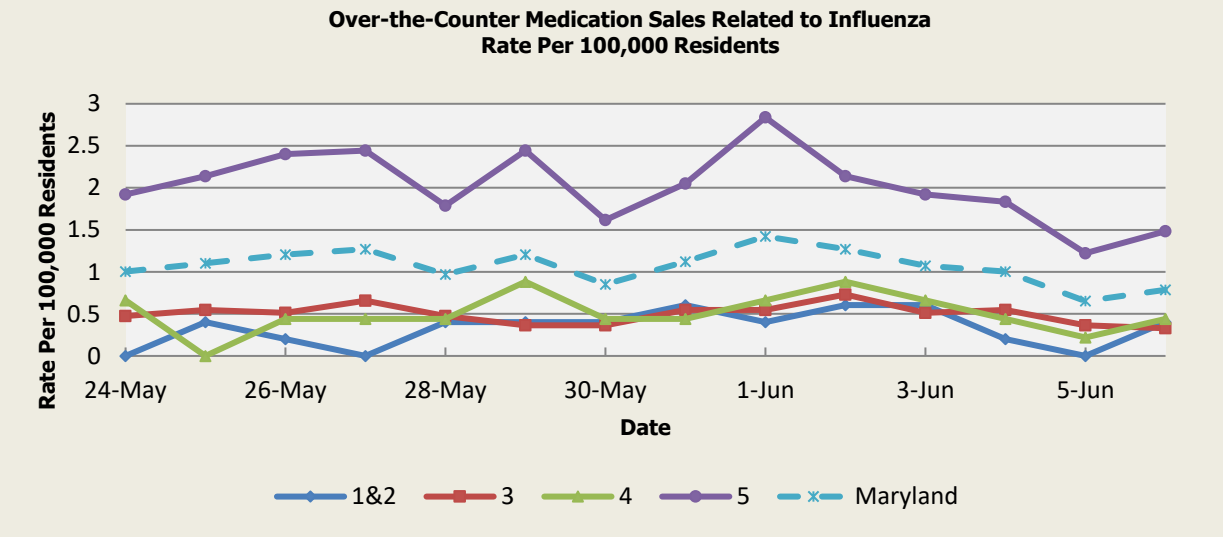
Over-the-Counter Influenza-Related Medication Sales



There was no appreciable increase above baseline in the rate of OTC Medication Sales during this reporting period.

	OTC Medication Sales Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	3.38	4.32	2.63	7.71	5.41
Median Rate*	2.62	3.40	2.21	6.94	4.62

** Per 100,000 Residents*

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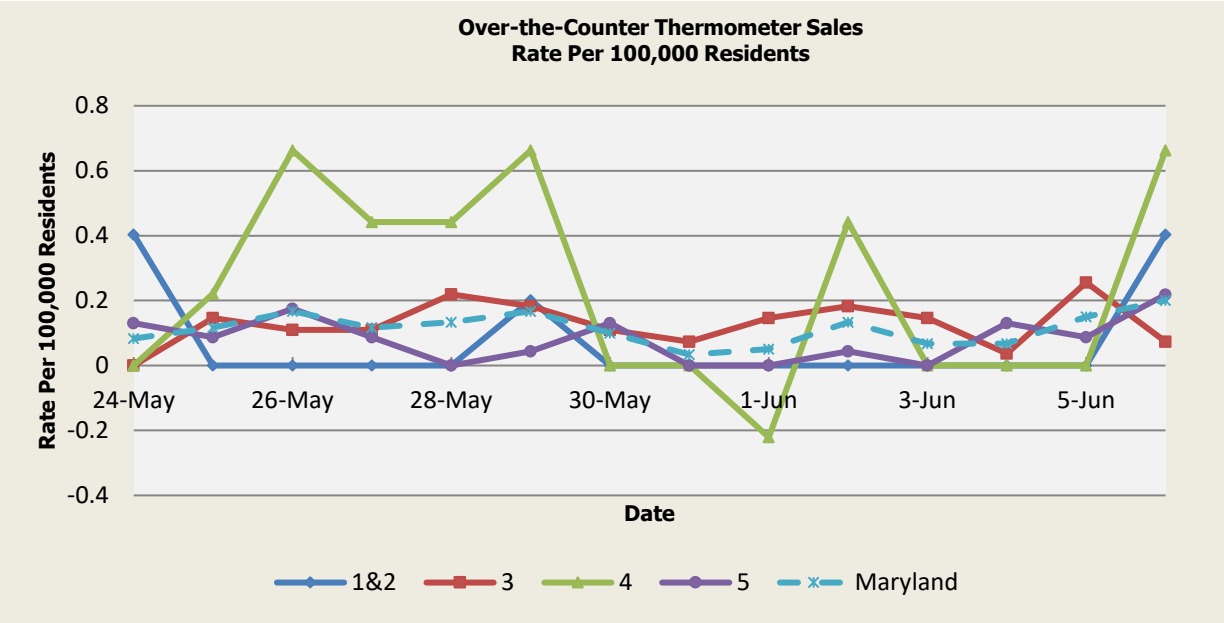
Over-the-Counter Thermometer Sales



There was no appreciable increase above baseline in the rate of OTC Thermometer Sales during this reporting period.

	Thermometer Sales Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	2.82	2.67	2.15	3.55	2.98
Median Rate*	2.62	2.59	1.99	3.49	2.96

** Per 100,000 Residents*

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SYNDROMIC OVERDOSE SURVEILLANCE

The purpose of this section is to characterize non-fatal ED visit trends for acute unintentional overdose by Heroin, Opioid or Unspecified substance among Maryland residents captured by ESSENCE data, including chief complaint and discharge diagnosis. ED visits that are identified as unintentional overdose by Heroin, Opioid or Unspecified substance include those with medical and non-medical use of a prescription Opioid or where the substance is not specified, given evidence that most fatal overdoses are Opioid-related.

In preparation for the release of new ESSENCE queries for identifying heroin, opioid and all drug overdoses, please note that we have removed the data chart showing unintentional overdose rates by heroin, opioid, or unspecified substances. These new data, when available, will be presented below.

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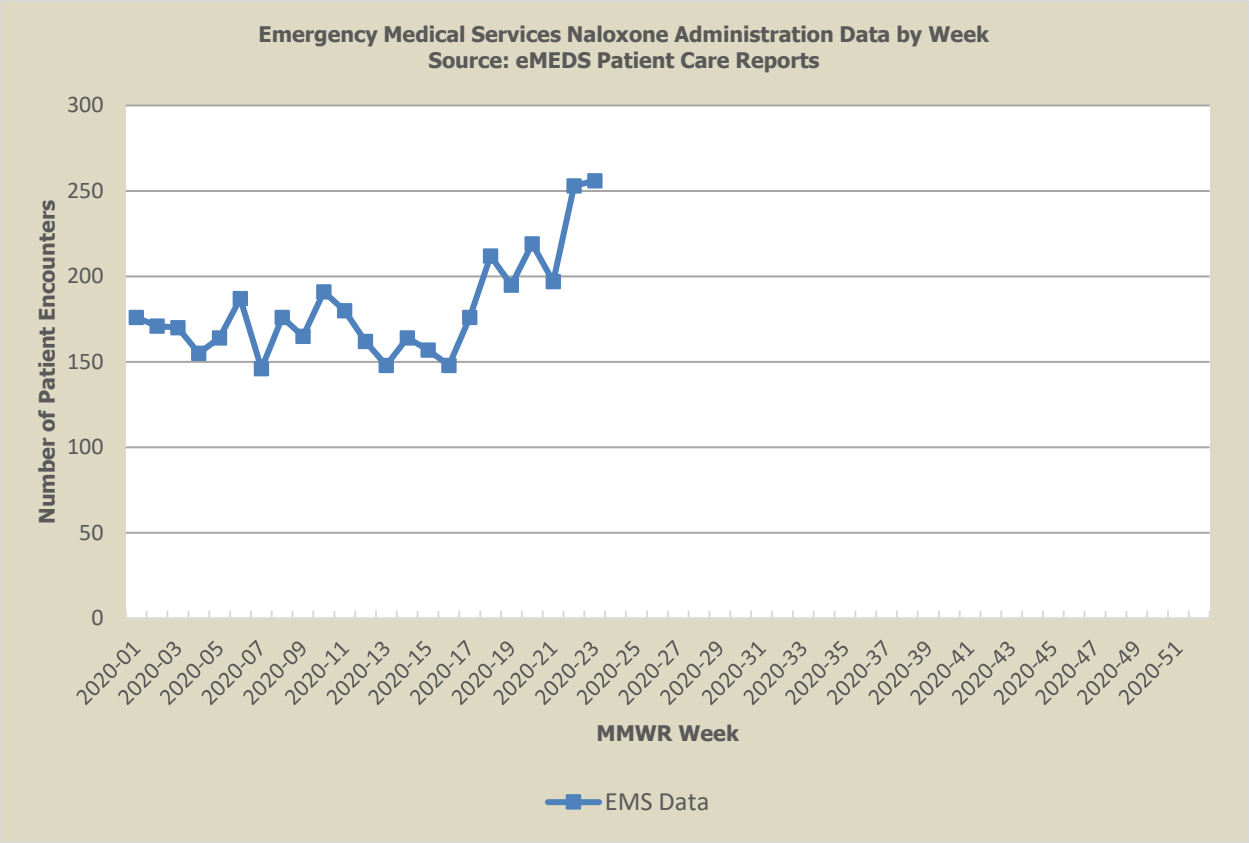
Naloxone Administration Data by Week



Disclaimer on eMEDS naloxone administration related data: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

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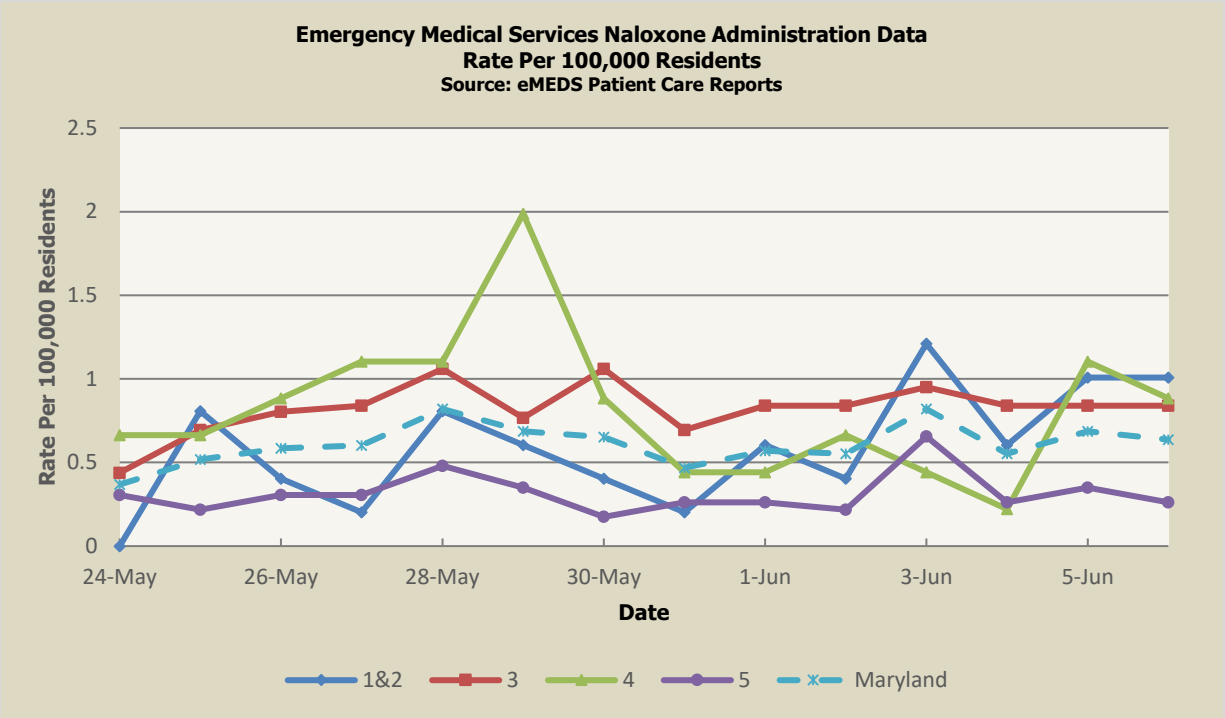
Naloxone Administration Data



Disclaimer on eMEDS Naloxone administration related data: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

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PANDEMIC INFLUENZA UPDATE / AVIAN INFLUENZA-RELATED REPORTS

WHO update: The current WHO phase of pandemic alert for avian influenza is ALERT. Currently, the avian influenza H5N1 virus continues to circulate in poultry in some countries, especially in Asia and northeast Africa. This virus continues to cause sporadic human infections with some instances of limited human-to-human transmission among very close contacts. There has been no sustained human-to-human or community-level transmission identified thus far.

Influenza A (H7N9) is one of a subgroup of influenza viruses that normally circulate among birds. Until recently, this virus had not been seen in people. However, human infections have now been detected. Presently, there is limited information about the scope of the disease the virus causes and about the source of exposure. The disease is of concern because most patients have been severely ill. There is no indication thus far that it can be transmitted between people, but both animal-to-human and human-to-human routes of transmission are being actively investigated.

Alert phase: This is the phase when influenza caused by a new subtype has been identified in humans. Increased vigilance and careful risk assessment, at local, national, and global levels are characteristic of this phase. If the risk assessments indicate that the new virus is not developing into a pandemic strain, a de-escalation of activities towards those in the interpandemic phase may occur. As of June 9th, 2020, the WHO-confirmed global total (2003-2020) of human cases of H5N1 avian influenza virus infection stands at 861, of which 455 have been fatal. Thus, the case fatality rate for human H5N1 is approximately 53%.

AVIAN INFLUENZA

There were no relevant avian influenza reports this week

HUMAN AVIAN INFLUENZA

There were no relevant human avian influenza reports this week

NATIONAL DISEASE REPORTS

RABIES (NORTH CAROLINA), 9 June 2020, A fox tested positive for rabies after attacking 2 people in Nash County, the Nash County Health Department said. Read More: https://promedmail.org/promed-post/?id=7447179

STREPTOCOCCUS, GROUP A (WISCONSIN), 5 June 2020, When [the parents] and their 3 young children trooped into a Madison, Wisconsin, urgent care clinic around 8 a.m. on New Year's Day 2018, the staff didn't seem surprised to see them. Read More: https://promedmail.org/promed-post/?id=7429132

CORONAVIRUS DISEASE 2019 UPDATE (NEW YORK), 10 June 2020, The above are the latest breakdowns of confirmed cases of SARS-CoV-2 infection in the USA as per Worldometer

data. The total number of confirmed cases in the USA and territories is now 2 045 549, including 114 148 deaths, an increase from 2 026 493 cases and 113 055 deaths in the past 24 hours. Read More: https://promedmail.org/promed-post/?id=7448037

INTERNATIONAL DISEASE REPORTS

CORONAVIRUS DISEASE 2019 UPDATE: WHO, (GLOBAL), 10 June 2020, more than 7 million cases of COVID-19 and over 400 000 deaths have now been reported to WHO. Although the situation in Europe is improving, globally it is worsening. Read More: https://promedmail.org/promed-post/?id=7448035

PSEUDOMONAS YANGONENSIS (MYANMAR), 10 June 2020, Strains of a Gram-negative, aerobic, rod-shaped, non-spore-forming bacterium, designated MY50T, MY63 and MY101, were isolated from wound samples of 3 hospitalized patients in Yangon, Myanmar. Read More: https://promedmail.org/promed-post/?id=7447902

EBOLA UPDATE (DEMOCRATIC REPUBLIC OF CONGO), 6 June 2020, An Ebola outbreak in the eastern part of the Democratic Congo (DRC), which has been going on for nearly 2 years, was almost contained when another outbreak was confirmed at the far end of the country in the northwest. Read More: https://promedmail.org/promed-post/?id=7432964

OTHER RESOURCES AND ARTICLES OF INTEREST

More information concerning Public Health and Emergency Preparedness can be found at the Office of Preparedness and Response website: http://preparedness.health.maryland.gov/ or follow us on Facebook at www.facebook.com/MarylandOPR.

More data and information on influenza can be found on the MDH website: http://phpa.health.maryland.gov/influenza/fluwatch/Pages/Home.aspx

Please participate in the Maryland Resident Influenza Tracking System (MRITS): http://flusurvey.health.maryland.gov

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NOTE: This weekly review is a compilation of data from various surveillance systems, interpreted with a focus on a potential BT event. It is not meant to be inclusive of all epidemiology data available, nor is it meant to imply that every activity reported is a definitive BT event. International reports of outbreaks due to organisms on the CDC Critical Biological Agent list will also be reported. While not "secure", please handle this information in a professional manner. Please feel free to distribute within your organization, as you feel appropriate, to other professional staff involved in emergency preparedness and infection control.

For questions about the content of this review or if you have received this and do not wish to receive these weekly notices, please e-mail us. If you have information that is pertinent to this notification process, please send it to us to be included in the routine report.

Prepared By:
Office of Preparedness and Response, Maryland Department of Health
300 W. Preston Street, Suite 202, Baltimore, MD 21201
Fax: 410-333-5000

Peter Fotang, MD, MPH
Epidemiologist, Biosurveillance Program
Office: 410-767-8438
Email: Peter.Fotang@maryland.gov

Jennifer Stanley, MPH
Epidemiologist, Biosurveillance Program
Office: 410-767-2074
Email: Jennifer.Stanley@Maryland.gov

Jessica Acharya (Goodell), MPH
Career Epidemiology Field Officer, CDC
Office: 410-767-6745
Email: Jessica.Goodell@maryland.gov

Appendix 1: ESSENCE Syndrome Definitions and Associated Category A Conditions

Syndrome	ESSENCE Definition	Category A Conditions
Botulism-like	(Botulism or (DifficultyFocusing and DifficultySpeaking) or (DifficultySpeaking and DifficultySwallowing) or (DifficultySwallowing and DifficultyFocusing) or DoubleVision or FacialParalysis or GuillainBarre or Ptosis) and not GeneralExclusions	Botulism
Fever	(Chills or (FeverPlus and (Drowsiness or Seizure)) or FeverOnly or SepsisGroup or ViralSyndrome) and not GeneralExclusions	N/A
Gastrointestinal	(AbdominalCramps or AbdominalPainGroup or Diarrhea or FoodPoisoning or Gastroenteritis or GIBleeding or Peritonitis or Vomiting) and not (GeneralExclusions or Gynecological or Obstetric or Reproductive or UrinaryTract)	Anthrax (gastrointestinal)
Hemorrhagic Illness	(FeverOrChills and (AcuteBloodAbnormalitiesGroup or BleedingFromMouth or BleedingGums or GIBleeding or Hematemesis or Hemoptysis or Nosebleed or Petechiae or Purpura)) and not GeneralExclusions	Viral Hemorrhagic Fever
Localized Lesion	(Boils or Bump or Carbuncle or DepressedUlcer or Eschar or Furuncle or InsectBite or SkinAbscess or (SkinSores and not AllOverBody) or SkinUlcer or SpiderBite) and not (GeneralExclusions or Decubitus or Diabetes or StasisUlcer)	Anthrax (cutaneous) Tularemia
Lymphadenitis	(BloodPoisoning or Bubo or CatScratchDisease or SwollenGlands) and not GeneralExclusions	Plague (bubonic)
Neurological	(([Age<75] and AlteredMentalStatus) or (FeverPlus and (Confusion or Drowsiness or Petechiae or StiffNeck)) or Delirium or Encephalitis or Meningitis or UnconsciousGroup) and not GeneralExclusions	N/A
Rash	(ChickenPox or Measles or RashGeneral or Roseola or (Rubella and not Pregnancy) or Shingles or (SkinSores and AllOverBody) or Smallpox) and not GeneralExclusions	Smallpox
Respiratory	(Anthrax or Bronchitis or (ChestPain and [Age<50]) or Cough or Croup or DifficultyBreathing or Hemothorax or Hypoxia or Influenza or Legionnaires or LowerRespiratoryInfection or Pleurisy or Pneumonia or RespiratoryDistress or RespiratoryFailure or RespiratorySyncytialVirus or RibPain or ShortnessOfBreath or Wheezing) and not (GeneralExclusions or Cardiac or (ChestPain and Musculoskeletal) or Hyperventilation or Pneumothorax)	Anthrax (inhalational) Tularemia Plague (pneumonic)
Severe Illness or Death	CardiacArrest or CodeGroup or DeathGroup or (Hypotension and FeverPlus) or RespiratoryArrest or SepsisGroup or Shock	N/A

Appendix 2: Maryland Health and Medical Region Definitions

Health and Medical Region	Counties Reporting to ESSENCE
Regions 1 & 2	Allegany County Frederick County Garrett County Washington County
Region 3	Anne Arundel County Baltimore City Baltimore County Carroll County Harford County Howard County
Region 4	Caroline County Cecil County Dorchester County Kent County Queen Anne's County Somerset County Talbot County Wicomico County Worcester County
Region 5	Calvert County Charles County Montgomery County Prince George's County St. Mary's County